Attorney's Docket No: PHB 34372 US

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below)

	TION FINDING SY		for which a patent is sou	ght on the	nvention entitled		<u></u>
	ification of which (	·					
X	is attached here	to					
	was filed on		as Ap	plication Se	erial No:	an	d was amended of
amendm acknow Regulation hereby pelow an	ent referred to aboutedge the duty to ons, §1.56 (a). claim foreign prio	e reviewed and ove. disclose informative benefits und	understand the content nation which is material to der Title 35, United State	ts of the a to the exames es Code, §	bove-identified specification, mination of this application in and of any foreign application ntor's certificate having a filing	including the claims, a accordance with Title 3 n(s) for patent or invention	37, Code of Feder
ononly is	ciairried.		PRIOR FOI	REIGN A	PPLICATION(S)		
	COUNTRY		APPLICATION NU		DATE OF FILING (day, month, year)	Claime	RITY d Under
						35 U.S	.C. 119
GREA	T BRITAIN		9918348.5		05-08-1999	Yes X	No
						Yes	No
	declare that all sta		FILING DATE		STATUS (PATEN	TED, PENDING, ABANG	Paris Carlos Dispersion (1944)
e true; nprisoni	and further that th	ese statements er Section 1001	were made with the kno	wledge that	at willful false statements and de and that such willful false s	the like so made are pu	inishable by fine
			ce connected therewith.  Jack E.	(list name a Haken, Re	g attorney(s) and/or agent(s) and registration number) eg. No 26,902 Reg. No 27,677	to prosecute this applica	tion and transact
SEND CORRESPONDENCE TO: Corporate Patent Counsel U.S. Philips Corporation 580 White Plains Road Tarrytown, New York 10591						DIRECT TELEPHONE CALLS TO: (Name and telephone number) (914) 332-0222	
Dated:	1.5	17/20	<u></u>	Inventor's S	gnature:		
FULL NAME OF INVENTOR: Last name  AVERY			First Name:				
RESIDEN	NCE & CITIZENSHIP. City WCKING			1 -	or Foreign Country:  Country of Citizenship:  GREAT BRITAIN		EITAIN
POST OF	FICE ADDRESS	Street & No:		City:	<u> </u>	State or Country:	Zip Code: GN23 TEB
Dated:		SANGER	NOTIVE , A	Inventor's Si		u un	14NC3 1CD
FULL NAME OF INVENTOR: Last name			First Name:	<del>-</del>	Middle Name:		
	IDENCE & CITIZENSHIP City				eign Country:	Country of Citizenship:	
	<u> </u>			L			15.0
POST OFF	FICE ADDRESS	Street & No:		City:		State or Country:	Zip Code: